PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450

Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

annronriate All further	correspondence includired below or directed oth	ng the Pa	atent, advance or	ders and notification	of r	naintenance fees waspondence address;	/ill be i and/or	mailed to the current of (b) indicating a separ	ould be completed where correspondence address as ate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
36067									-tt	
DALINA LAW GROUP, P.C. 7910 IVANHOE AVE. #325 LA JOLLA, CA 92037						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
						Daniel Nakaji			(Depositor's name)	
		/DN58017/				(Signature)				
		10/24/2007				(Date)				
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN		ITOR	R ATTOR		RNEY DOCKET NO.	CONFIRMATION NO.	
10/710,003	0,003 06/11/2004			Greg Koennecke VI-P0001					4002	
PITLE OF INVENTION		I					n rne	TOTAL FEE(0) DUE	DATE DUE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE DUE				TOTAL FEE(S) DUE		
nonprovisional	YES		\$700	\$300		\$0		\$1000	11/09/2007	
EXAMINER			ART UNIT	CLASS-SUBCLASS		J		•		
HARRINGTO	351-206000									
1. Change of corresponde CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Dalina Law Group, P.C.									
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				or agents OR, alternatively, (2) the name of a single firm (having as a member a 2						
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)										
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIG			B) RESIDENCE: (CITY and STATE OR COUNTRY)							
VISION INSTRUMENTS PTY LTD Ade						ide, Australia				
Please check the appropr	iate assignee category or	rcategor	ries (will not be pr	rinted on the patent):		Individual 🛛 C	orporati	on or other private grou	up entity Government	
4a. The following fee(s)	are submitted:		41			ase first reapply a	ny prev	iously paid issue fee s	hown above)	
Issue Fee	☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.									
Publication Fee (N	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any									
				overpayment, to	Depo	osit Account Numb	er	(enclose an	extra copy of this form).	
5. Change in Entity Sta	tus (from status indicate is SMALL ENTITY state			☐ b. Applicant is n	o lon	nger claiming SMA	LL EN	FITY status. See 37 CF	R 1.27(g)(2).	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req	uired) wates Pate	vill not be accepte ent and Trademark	d from anyone other to Office.	han	the applicant; a reg	istered	attorney or agent; or the	e assignee or other party in	
Authorized Signature	0000					Date		10/24/2007		
Typed or printed nam	_{e_Daniel Na}	kaji		·		Registration 1		58,017		
				on is required to obtain 1.14. This collection	n or	retain a benefit by	the pub	lic which is to file (and s to complete, including	by the USPTO to process) g gathering, preparing, and ne you require to complete	

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.